County Seal



# MICHIGAN DEPARTMENT OF STATE OFFICE OF THE GREAT SEAL

For County Use Only			
County name			
Date of oath			
and bond			
Oath	Attorney (oath only)		
administered			
by, and bond			
filed with:	(Clerk's initials)		

#### APPLICATION FOR MICHIGAN NOTARY PUBLIC COMMISSION

(Please print or type	e; all fields are required)				
1. Driver's license or personal identification card number:			Issuing state:	Issuing state:	
2. Full name (first/r	niddle/last):				
3. Residence addres (no PO boxes)	ss:	City:	State:	Zip:	
4. Date of birth:		5. E-mail address:			
6. Business address	:	City:	State:	Zip:	
7. If you are a licentification (skip if you are not a li	sed attorney in Michigan, enter yo icensed attorney)	our State Bar number: P-			
8. County: Please check, the above is your: County of residence County of employment (if you are a non-Michigan resident)					
9. Telephone numb	pers: Residence:	Business:			
	date and circumstance of any felo ditional pages if necessary. If no	ony or misdemeanor convictions during the ne, please indicate N/A.	ne previous ten years i	n this or any other	
expiration date a	hold or have ever held a notary pand the state that issued the most rexpires/expired (month/day/year)		e, please provide the  Issuing state:		
		evoked, suspended, restricted, or cancelle ase explain. Attach additional pages if n			
possess proof of legal p served time during the the information provide appointed and commiss understand that all info	presence; am able to read and write in immediate past ten years for a felony ed in this application is true, complete sioned as a notary public, I will performation contained on this application closing a check or money order in the	t of Michigan or maintain a principal place of a the English language; am not currently incar or misdemeanor offense in any state. I soleme, and correct; that I have carefully read the norm faithfully, to the best of my ability, all not a is subject to disclosure under the Freedom of e amount of \$10.00, payable to the State of M	cerated in a correctional unly affirm, under the pe otary laws of Michigan; arial acts in accordance f Information Act, 1976	facility or have nalty of perjury, that and that, if with the law. I PA 442, MCL	
NAME:	Clearly print or type your name, as	it will appear on documents you notarize.			
SIGNATURE:	Sign your name, as it will appear o must match your name printed abo	n documents you notarize. Your signature ve.			

### THIS APPLICATION MUST FIRST BE PROCESSED AT YOUR LOCAL COUNTY CLERK'S OFFICE BEFORE MAILING IT TO THE OFFICE OF THE GREAT SEAL.

**Application for commission:** A notary public who is currently commissioned in the State of Michigan may not submit a new application for commission earlier than 60 days prior to current commission expiration.

**Commissioned name:** Your commissioned name may differ from your full name as long as it is a derivative of your full legal name (Example: Jane Marie Doe could be Jane Doe, J.M. Doe or J. Doe). It <u>must match</u> the name you have printed and signed at the bottom of the first page of this application.

Oath and bond filing requirements: Before sending the application to the Office of the Great Seal, you must swear a constitutional oath of office, file a \$10,000.00 surety bond, and pay a \$10.00 filing fee with the county clerk. Information on where to obtain your surety bond and the cost is available from insurance agents and other companies that will solicit your business. A list of licensed surety agencies can also be found through our Web site at <a href="https://www.Michigan.gov/sos">www.Michigan.gov/sos</a>. If you are a licensed attorney in Michigan, you are not required to file a surety bond; enter your State Bar number on line 7. Your license status will be verified by the Office of the Great Seal.

**Submitting application and fees to the Office of the Great Seal:** After swearing the oath, filing your bond with the county clerk and paying the nonrefundable filing fee to the county clerk's office, mail your completed application to:

Michigan Department of State Office of the Great Seal 7064 Crowner Drive Lansing, MI 48918

A \$10.00 check or money order payable to the "State of Michigan" must accompany the application. Please do not send cash. This must occur within 90 days from the date the oath is administered and bond filed with the county clerk (MCL 55.273).

Receiving your commission: You may not act as a notary public until the required oath, bond, and fees are filed with the county clerk, you submit your application and fees to the Office of the Great Seal, and receive your commission. Your notary public commission certificate, with commission expiration date information, will be mailed to the residence address provided on your application. Please expect to receive your certificate within 14 business days after the Office of the Great Seal receives your application for processing. The residence address you list must match what is on file with the Michigan Department of State for your driver's license or personal identification card. If you provide a different address, your application will be returned to you with instructions on how to change your address using the Michigan Change of Address/Voter Registration form available on our Web site, www.Michigan.gov/sos, or by visiting a Secretary of State branch office.

**Term of appointment:** Notary commissions expire six (6) years from your next birthday at the time of commission issuance.

Change of name or address: All changes of name and/or address must be reported to the Office of the Great Seal on the Michigan Notary Public Request for Duplicate/Notice of Change form, available at our Web site <a href="www.Michigan.gov/sos">www.Michigan.gov/sos</a>. The name and residence address you list must match what is on file with the Michigan Department of State for your driver's license or personal identification card. If you provide a different name and/or address, your Request for Duplicate/Notice of Change form will be returned to you with instructions on how to change your address using the Michigan Change of Address/Voter Registration form available on our Web site, <a href="www.Michigan.gov/sos">www.Michigan.gov/sos</a>, or in the case of a name change, by visiting a Secretary of State branch office.

**Notary public stamp and/or seal:** Contact your local office supply store or printing shop for information on purchasing these items. The State of Michigan does not furnish or sell these items or make any other recommendations on where to obtain them. Use of these items is not required in the State of Michigan.

Please direct any questions about your notary application to the Office of the Great Seal at (888) SOS-MICH (767-6424).

### MACOMB COUNTY NOTARY PUBLIC APPLICATION COVER FORM

TO:	Macomb County Clerk/Register of Deeds Carmella Sabaugh 40 North Main, First Floor Mount Clemens, MI 48043 Phone 586-469-7935 M-F 8am – 5pm (until 7:00 pm Wednesdays)	
PLEA	SE PRINT	
FROM	/I: Name	
	Address	
	City Zip Code	
	Day Phone	
RE:	Notary Public Commission	
TODA	AY'S DATE:	
1.	Select either U.S. mail or Delivered in person options.  Application is sent U.S. mail (must include ALL of the following):  □ \$10 payable to Macomb County Clerk  □ Original Application For Michigan Notary Public Commission (must be signed and notarized)  □ Original Bond (must be signed and notarized)	
	OR	
	Application is delivered in person (must include ALL of the following): The Clerk's Office will notarize the applicant's signature if proper identification is provided.  \$10 payable to Macomb County Clerk  Original Application For Michigan Notary Public Commission Original Bond	
3.	How do you want your copies of your Notary Public application and bond delivered to you? (Check one box below)  ☐ U.S. Mail, first-class. Send license to address above. FREE ☐ Pick up at Macomb County Clerk's Office. FREE Date	
4.	Payment Information (Check one box below.)  ☐ If applying by mail, complete Credit Card Information Form on next page, OR enclose a check payable to, "Macomb County Clerk."  ☐ If applying in person, bring cash, credit card or a check to the County Clerk's Office payable to: "Macomb County Clerk."	

# CREDIT CARD INFORMATION FORM INCLUDE THIS FORM IF YOU ARE PAYING BY CREDIT CARD

CREDIT CARD PAYMENT INFORMATION				
Type of credit card being used:  □ VISA □ MasterCard □ Discover □ American Express				
Credit card number				
Expiration date:/				
I authorize the Macomb County Clerk's Office to charge me UP TO the pre-authorized amount listed on page one for the marriage license.				
READ THIS AND SIGN BELOW I also authorize the Macomb County Clerk's office and all third parties to rely upon a facsimile copy of this form and the original Application For Michigan Notary Public Commission and Bond.				
Cardholder name (Please Print) Date				
Cardholder signature (REQUIRED)				
For a copies of this form or other forms call: 1-888-99-CLERK (that's 1-888-992-5375) This form is document number 3140. A complete listing of forms is document one. For HELP completing this form call 586-469-6283.				
Macomb County Clerk's Office Use Only Card approved? ☐ yes ☐ no Clerk's initials: Date: Mailed? ☐ yes ☐ no Certificates picked up? ☐ yes Date:				